## **Listing of Claims:**

- 1. (previously presented) A method for treating a human patient suffering from chronic angina by administering a sustained release pharmaceutical dosage form including at least 50% by weight ranolazine in no more than two tablets per dose to the human patient to maintain ranolazine plasma levels in the human patient of from about 550 to about 7500 ng base/mL for at least 24 hours wherein the dose is administered at a frequency selected from once, twice and three times over 24 hours.
- 2. (original) The method of claim 1 wherein the sustained release dosage form includes at least one pH dependent binder wherein the pH dependent binder inhibits the release of ranolazine from the sustained release dosage form when the sustained release dosage form is subjected to an aqueous environment having a pH of the stomach and wherein the pH dependent binder promotes the release of a therapeutic amount of ranolazine in an aqueous solution having a pH above about 4.5.
- 3. (original) The method of claim 2 wherein the pH dependent binder is partially neutralized.
- 4. (original) The method of claim 1 wherein the pharmaceutical dosage form is administered to the human patient at a frequency selected from once and twice over 24 hours.
- 5. (previously presented) The method of claim 1 wherein the pharmaceutical dosage form is administered to the human patient in two doses over 24 hours wherein each dose consists of two tablets.
- 6. (original) The method of claim1 wherein the pharmaceutical dosage form includes between about 50% to about 95% by weight ranolazine.

- 7. (original) The method of claim 1 wherein the pharmaceutical dosage form includes from about 70% to about 80% by weight ranolazine.
- 8. (previously presented) The method of claim 2 wherein the pH dependent binder is selected from methacrylic acid copolymers, hydroxypropyl cellulose phthalate, hydroxypropyl methylcellulose phthalate, cellulose acetate phthalate, polyvinylpyrrolidine phthalate, and mixtures thereof.
- 9. (original) The method of claim 2 wherein the pH dependent binder is a methacrylic acid copolymer.
- 10. (original) The method of claim 9 wherein the methacrylic acid copolymer is methacrylic acid copolymer Type C USP.
- 11. (original) The method of claim 2 wherein the pH dependent binder is from about 5 to about 12 wt% methacrylic acid copolymer Type C USP.
- 12. (original) The method of claim 1 wherein the pH dependent binder is about 10 wt% methacrylic acid copolymer Type C USP.
- 13. (original) The method of claim 1 wherein the pharmaceutical dosage form includes a pH-independent binder.
- 14. (original) The method of claim 13 wherein the pH-independent binder is selected from hydroxypropyl methylcellulose, hydroxypropyl cellulose, poly(meth)acrylate esters, poly-vinylpyrrolidone, and mixtures thereof.
- 15. (original) The method of claim 13 wherein the pH-independent binder is hydroxypropyl methylcellulose.

- 16. (original) The method of claim 15 wherein the pharmaceutical dosage form includes from about 1 to about 3 wt% hydroxypropyl methylcellulose.
- 17. (original) The method of claim 15 wherein the pharmaceutical dosage form includes about 2 wt% hydroxypropyl methylcellulose.
- 18. (original) The method of claim 1 or 6 or 7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17 wherein the human patient plasma ranolazine level ranges from 1000-5000 ng base/mL.
- 19. (original) The method of claim 1 or 6 or 7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17 wherein the human patient plasma ranolazine level ranges from 1000-3800 ng base/mL.
- 20. (original) The method of claim 1 or 6 or 7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17 wherein the human patient plasma ranolazine level ranges from 550-5000 ng base/mL.
- 21. (original) The method claim of 1 or 6 or 7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17 wherein the human patient plasma ranolazine level ranges from 550-3800 ng base/mL.
- 22. (original) The method of claim 1 or 6 or 7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17 wherein the human patient plasma ranolazine level ranges from 1000-2800 ng base/mL.
- 23. (original) The method of claim 1 or 6 or 7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17 wherein the human patient plasma ranolazine level ranges from 1700-3900 ng base/mL.

- 24. (original) The method of claim 1 or 6 or 7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17 wherein the human patient plasma ranolazine level ranges from 550-2000 ng base/mL.
- 25. (original) The method of claim 23 wherein the dosage form includes from 650-850 mg ranolazine.
- 26. (original) The method of claim 24 wherein the dosage form includes from 900-1100 mg ranolazine.
- 27. (original) The method of claim 25 wherein the dosage form includes from 400-600 mg ranolazine.
- 28. (original) The method of claim 22 or 23 or 24 or 25 or 26 or 27 wherein the peak to trough human patient plasma ranolazine levels is less than 4:1 over a 24 hour period.
- 29. (original) The method of claim 23 or 24 or 25 or 26 or 27 wherein the peak to trough human patient plasma ranolazine levels is less than 3:1 over a 24 hour period.
- 30. (original) The method of claim 24 or 28 wherein the peak to trough human patient plasma ranolazine levels is less than 2:1 over a 24 hour period.